IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 210929

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM

PIN # 4655352322

APPLICANT: Thomas Willig APPLICANT ADDRESS: 159 Live Oak Ln Mooresville, NC 28115

SITE ADDRESS: 159 Live Oak Ln PHONE: ALT. PHONE: 704 906 3310

SITE DIRECTIONS: Hwy 115 S. TL Faith Rd TR Live Oak 3rd house on left

SUBDIVISION: T & T Land & Timber (LG Caldwell Est) SECTION: LOT # 8 LOT AREA: 4.83 Acre DESIGN FLOW: ~~X~~ 360 gpd T.A.R.: .25

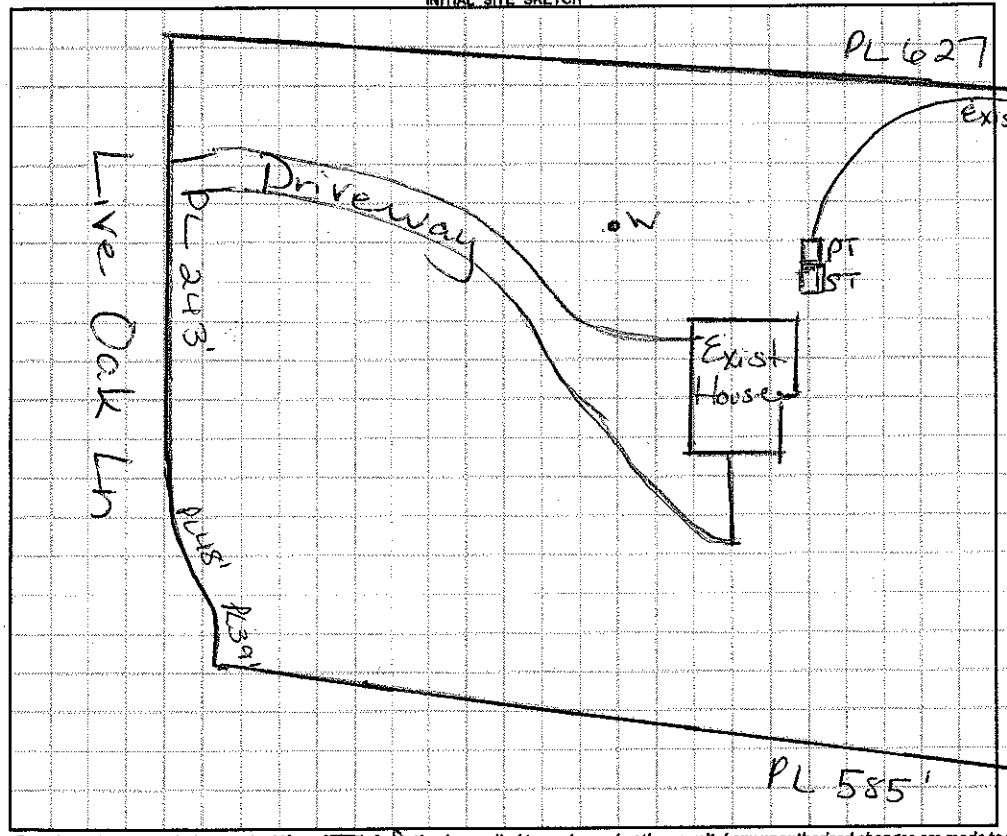
Septic Tank	1250 (gal)	STB		Date		☐ New System ☐ Repair ☒ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms	3	Water Supply
Pump Tank	1250 (gal)	PT		Date		System Description:	Pump-LP-25% Reduction	☐ Business	No. Persons	6	☒ Private
Pump Make	Wet Goods	Model	WEDS 12H	Serial #		Repair System Description:	Same	☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	2 @ 60'	Linear Ft:	120'	Maintenance Agreement Required:	☒ YES ☐ NO	☐ Slab	☐ Crawl Space		☐ Community
Trench Width	36"	Max. Trench Bottom Depth	30"	Gravel Depth	N/A		☐ GRAVITY ☒ PRESSURE	☒ Basement w/plumbing		☐ Basement w/o plumbing	

6x

Comments / Conditions: * Upgrading from 2 Bedrooms to 3 Bedrooms 8/12/15 Drilled 5/32" hole every 10ft. Checked lines

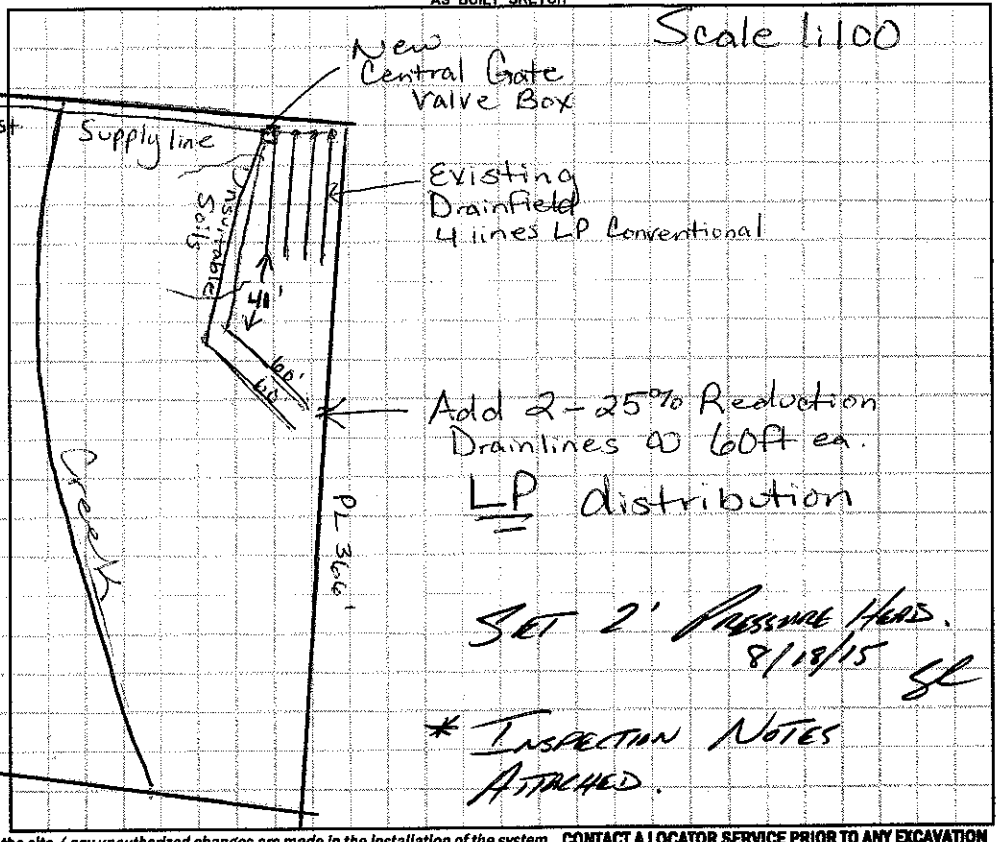
* Add to existing Septic System LP distribution on new drainlines. Install Central Gate Valve box & tie all drainlines into it.

INITIAL SITE SKETCH



AS BUILT SKETCH

Scale 1:100



SET 2' Pressure Head. 8/18/15 SL

* Inspection Notes Attached.

Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 7/15/15 Installed by: Wastewater Solutions

IMPROVEMENT PERMIT by: Marian H. Olsen RS Date: 7/6/15 OPERATION PERMIT by:

AUTHORIZATION TO CONSTRUCT by: Marian H. Olsen RS Date: 7/6/15 Existing System Inspected by: Date:

APPROVED: AUG 18 2015

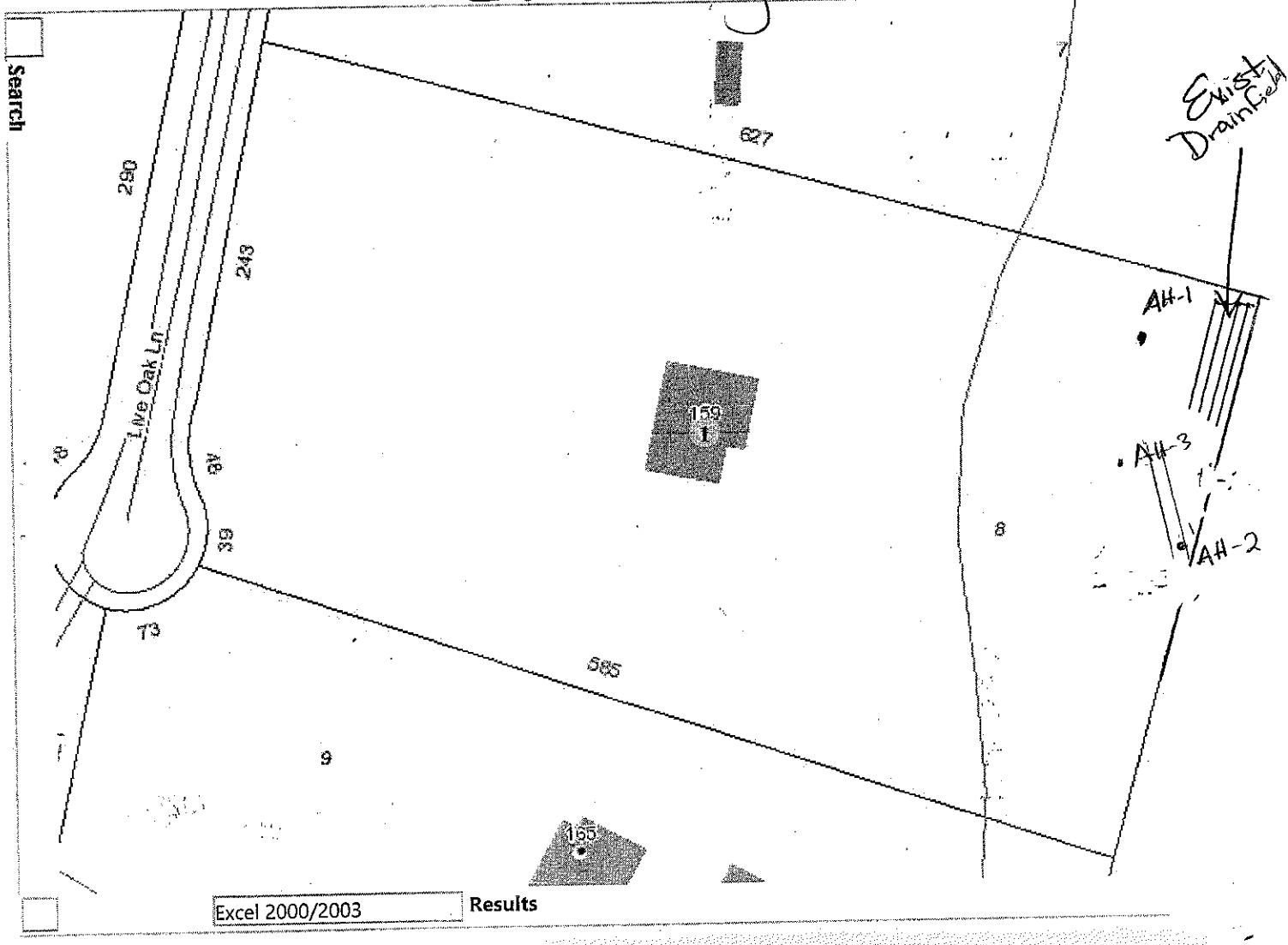
Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

Thomas Willig

CONNECTGIS WEB HOSTING

IREDELL COUNTY NORTH CAROLINA

Soil Boring Locations 1:100



	Date	Initials
Drain Lines Checked	8/12/15	MD
Tanks Checked		
Pressure Manifold or Valve Box Checked	8/18/15	SC
Pressure Head Set	8/18/15	SC
Electrical Checked	8/18/15	SC
Floats Set	8/18/15	SC
Alarm Checked	8/18/15	SC
Maintenance Contract Y / N	8/18/15	SC

Needs Maint. Contract - attached